

FOR INSURANCE USE
DO NOT MAIL FORM TO US

NO.	APRIL		MAY	
	MON.	TUE.	MON.	TUE.
1				
2				
3				
4				
5				
6				
7				
8				
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10				
11	1			
12		1		
13		1		
14		1		
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21	1			
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48				
49				
50				
TOTAL MON.	4			
TOTAL TUE.	23			
TOTAL GROSS	27			

CLAIMS

NO.	DR.	NO.	DR.	NO.	DR.
51					
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97					
98					
99					
100					
TOTAL NO.	4				
TOTAL DR.	23				
TOTAL CLAIMS	27				

CONTINUED ON BACK

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U.S. DEPARTMENT OF COMMERCE